

# PACIFIC FIRST DENTAL & HEALTHCARE PLANS

Over 42 years providing group benefits, adjudication and administration services

## OVERAGE DEPENDENT DECLARATION

Once a dependent child turns 21, to continue coverage we require notification that he/she is an unmarried child under the age of 25 who is attending a post-secondary educational institution on a full-time basis. Full-time requirement is a minimum of three (3) full time courses.

Dependent Child Eligibility is confirmed annually, even if the dependent is a returning student. Please complete one form for **each dependent child** over the age of 21 and under the age of 25.

<b>Plan Number</b>	<b>Company Name</b>	
<b>Employee Name</b>	<b>Dependent Name</b>	<b>DOB (dd/mm/yyyy)</b>
<b>Name of Educational Institution</b>	<b>Location of Education Institution</b>	

**Term child is attending school or college:**

Sep – Dec

Jan – Apr/Jun

Full School Year (Sep – Apr/Jun)

If your child will graduate at the end of the current school term/year – please advise the date of course completion: \_\_\_\_\_

**It is imperative that we receive this information to enable us to adjudicate any claims for overage dependents.**

Please return this form to Pacific First by mail, fax or email as per the information below.

I understand and agree that it is my responsibility to advise Pacific First Dental and Healthcare Plans should the dependent named cease to be eligible.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

PACIFIC RIM ADMINISTRATION SERVICES LTD.

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